

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>DL</i>	<i>68904</i>	<i>10/3/00</i>
O.I.P.E. CLASSIFIER	<i>DL</i>	<i>32</i>	<i>10/10</i>
FORMALITY REVIEW	<i>NL</i>	<i>553</i>	<i>10-31-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Best Available Copy

APPLICATION
09/668

APPLICANTS Robert

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WARNING:

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Form PTO-436A
(Rev. 6/99)

Claim	Date
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If more than 150 claims or 10 actions
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